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# Rehabilitation Literature

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Selected Abstracts of  
Current Publications of Interest  
to Workers with the Handicapped

*The NATIONAL SOCIETY  
for  
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*for*

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Founded in 1921, the National Society for Crippled Children and Adults, the Easter Seal Society, is a nationwide federation of fifty-two state and territorial societies dedicated to the purpose of helping crippled children and adults. This objective is implemented through a three-fold program:

Education of the public as a whole, of professional persons concerned with the care and treatment of the crippled, of the families of the crippled, particularly parents, and of volunteers and employers.

Research to provide increased knowledge of the causes and prevention of crippling, and of improved methods of care, education and treatment of crippled children and adults.

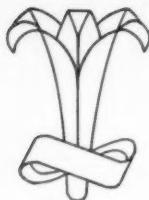
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The National headquarters provides professional consultation in program planning and community organization to state and local member societies. It maintains liaison with medical specialty groups, offers legislative guidance, a nationwide lending library devoted to literature on handicapping conditions, and a free national personnel registry and employment service which recruits and refers professional workers. It also has an active program of professional education, including scholarships and fellowships, summer workshops for training of professional personnel, exhibits at professional meetings and the publication and distribution of printed materials.



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**REHABILITATION LITERATURE** serves as a monthly abstracting index to books, pamphlets, and periodical articles on all phases of rehabilitation as relating to the care, welfare, education, and employment of handicapped children and adults.

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1. Professional and volunteer workers.
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3. Educational institutions and libraries.
4. Health and welfare agencies, both voluntary and governmental.

## ACCIDENTS

141. Rolen, Marian

Science says--what do we really know about accident proneness? Child Study. Winter, 1955-56. 33:1:27-29.

Gives a definition of accident-proneness and examines some of the basic assumptions upon which the theory rests. Findings of experimental studies and their implications are discussed. The author stresses need for a re-examination of the whole field of study of the problem.

## ADOLESCENCE

142. U. S. Children's Bureau

The adolescent in your family. Washington, D.C., Govt. Print. Off., 1955. 110 p. (Children's Bur. publ. no. 347-rev. 1955)

A revised edition of a booklet describing some of the underlying needs of the adolescent which result in behavior often hard for parents to understand. It discusses the health needs of adolescents, their emotional reactions, adjustments to physical changes, social relations with friends of both sex, responsibilities of the developing adolescent and parents' part in educational and vocational guidance.

Available from U. S. Superintendent of Documents, Washington 25, D.C., at 25¢ a copy.

## AMPUTATION (CONGENITAL)

143. Carty, Thomas J. (U. S. Naval Hosp., Navy Amputation Center, Oakland, Calif.)

Case history: Congenital bilateral arm amputation; a detailed report of the experimental fitting and prosthetic training of a six-year old girl, by Thomas J. Carty and Rosella Asbelle. Am. J. Occupational Ther. Nov.-Dec., 1955. 9:6:278-286.

"...details a team approach involving a specific case available for fitting and training for a period of eight weeks. A motion picture showing the results of these efforts has been produced and is available...."

Essentially the same as the publication issued by the U.S. Naval Hospital, Navy Prosthetic Research Laboratory, Oakland, California, titled "Cineplastic above-elbow prosthesis; interim progress report, research project NM 007 084.26." (Annotated in: Bulletin on Current Literature, Apr., 1955. #334)

## ARCHITECTURE

See 209.

## ARTHRITIS--MEDICAL TREATMENT

144. Bartfeld, Harry (135 E. 65th St., New York 21, N.Y.)

Use of reserpine in psychogenic rheumatism, osteoarthritis and rheumatoid arthritis; a preliminary report. J. Am. Med. Assn. Dec. 17, 1955. 159:16:1510-1513.

A report of results of the use of reserpine (Serpasil) in treating musculoskeletal complaints in 7 cases of psychogenic rheumatism, 16 cases of osteoarthritis, and 4 cases of rheumatoid arthritis. It appeared that the drug is

#### ARTHRITIS--MEDICAL TREATMENT (continued)

of value in treatment of psychogenic arthritis and of some aid in the other arthritides, although not of equal efficacy. In some patients it is a useful adjunct to symptomatic treatment of the various arthritides but no curative effects are claimed. In pure psychogenic rheumatism it should be combined with psychotherapy and analgesic drugs, the author states.

145. De Kruif, Paul

A new weapon against arthritis. Today's Health. Dec., 1955. 33:12: 22-23, 50-51.

New "super-aspirins," a hormone-salicylate mixture, are offering relief to thousands of arthritics. They can be used safely with no danger of complicating side-effects caused by other drugs. While the new pills do not contain enough antirheumatic hormone to give relief to fulminating rheumatoid arthritis, it brings help to those partially disabled by arthritis.

146. Kuhns, J. G.

Arthritic disabilities of the knee. Brit. J. Phys. Med. Dec., 1955. 18:12:270-273.

A discussion of treatment of disabilities of the knee in chronic arthritis, the use of physical medicine, support, and surgery in these disabilities, and the value of exercise after surgery.

#### ARTHRITIS--PHYSICAL THERAPY

147. Lawrence, J. S. (Walkden Clinic, Manchester, England)

The value of physiotherapy in rheumatic diseases; I. Palliation, by J. S. Lawrence and R. J. Sladden. Annals Phys. Med. Oct., 1955. 2:8: 282-289.

Describes a therapeutic trial to evaluate the palliative effect of physiotherapeutic procedures in the treatment of chronic rheumatic disorders. Eleven standard methods of applying heat were all more effective than a placebo. Short-wave diathermy produced the greatest relief and histamine ionization had the most prolonged effect. Both degree and duration of relief from pain were augmented by massage. No single mode of action explains completely the relief of pain which is afforded by the various methods.

#### AUDIO-VISUAL AIDS

148. Franck, Kari Natalie

Not "quickly form a circle." Mich. Educ. J. Dec. 1, 1955. 33:7:196-197.

Special educational tape recordings for use with orthopedic children in Muskegon, Michigan, public schools provided many opportunities for "in-school-listening," an enriched curriculum, and closer contact with a greater number of normal people. High school students assisting in the program have gained greater appreciation of the problems of the handicapped and some have become interested in training for specialized teaching positions.

#### BLIND--PARENT EDUCATION

149. Taylor, Walter (Minn. Dept. of Public Welfare, 117 University Ave., St. Paul, Minn.)

A weekend for parents. New Outlook for the Blind. Dec., 1955. 49:10: 377-381.

Describes a week-end discussion program for parents of visually

#### BLIND--PARENT EDUCATION (continued)

handicapped grade school children of Minneapolis and St. Paul, arranged by Minnesota Services for the Blind. Held at Camp Courage, the new facility of the Minnesota Easter Seal Society, it provided parent counseling on all aspects of the rearing of these children. Two letters sent by Mr. Taylor to the parents--one inviting them to attend the program, the other conveying last-minute instructions--are included. The author was coordinator of the program; he serves as consultant for preschool children with the Minnesota Dept. of Public Welfare, Services for the Blind.

#### BLIND--PROGRAMS

150. Quay, W. Earl (Pa. Assn. for the Blind, 1607 N. 2nd St., Harrisburg, Pa.)

A basic factor in rehabilitation of the blind. Bul., Am. Rehab. Comm. Nov., 1955. 4:3:(1-4).

Presents a picture of the employment status of the blind, the effect of the manpower shortage on their opportunities for employment, government aid to the blind, and changing trends in rehabilitation of the blind.

#### BLIND--RECREATION

See 167.

#### BLIND--SPECIAL EDUCATION

151. Misbach, Dorothy L. (3001 Derby St., Berkeley, Calif.)

An itinerant teaching program in the elementary grades. New Outlook for the Blind. Dec., 1955. 49:10:366-371.

Describes the qualifications of the itinerant teacher of the blind, the organization of an itinerant teaching program, types of instructional materials which should be provided the blind child, and the itinerant teacher's relationship to the regular classroom teacher. The use of volunteer services in a successful itinerant teaching program is stressed.

#### BRAIN

152. Mautner, Hans (Wrentham State School, Wrentham, Mass.)

Drug action on underdeveloped and damaged brains. Arch. Pediatrics. Aug., 1955. 72:8:265-274. Reprint.

A discussion of the effect of various drugs on children as compared to adults and the damaging effect of particular drugs on brain activity, especially that of the child with underdeveloped brain or damage to the brain.

#### CAMPING

See 149; 167.

#### CEREBRAL PALSY

153. Deaver, George G.

La paralysie cerebrale; methodes d'appréciation et de traitement. New York, Institute of Physical Medicine and Rehabilitation, 1955. 62 p. illus. (Monographies sur la reeducation IX)

French translation of: Deaver, George G. Cerebral palsy; methods of evaluation and treatment. New York, Institute of Physical Medicine and Rehabilitation, c1955. 57 p. (Rehabilitation monograph IX)

(For annotation of original monograph, see Bulletin on Current Literature, July, 1955, #658.)

Distribution of this publication in French by the International Society

#### CEREBRAL PALSY (continued)

for the Welfare of Cripples, 701 First Ave., New York 17, N. Y., was made possible by the Gustavus and Louise Pfeiffer Research Foundation.

#### CEREBRAL PALSY--GREAT BRITAIN

154. Fay, Temple (7304 Elbow Lane, Philadelphia 19, Pa.)

A clinical survey of British methods for the treatment of spastics.

Am. J. Psychiatry. July, 1955. 112:1:29-35. Reprint.

Dr. Fay reports his impressions of cerebral palsy clinics and treatment methods, gained during a six-weeks' observation of conferences, demonstrations, and lecture work in England and Scotland. Well-known clinics mentioned in British medical literature, the value of the "Bobath method" used in physical therapy, results from use of hemispherectomy, comparison of approach to the problem of cerebral palsy in Britain and the U. S., and the great demand in both countries for more trained personnel are discussed.

#### CEREBRAL PALSY--DIAGNOSIS

155. Aufricht, Hedda (Chicago Teachers Coll., Chicago, Ill.)

A proposed system of classifying the language defects of children with cerebral palsy. Exceptional Children. Dec., 1955. 22:3:109-111, 125-126.

A discussion of the development of language ability which includes comprehension of what is said as well as meaningful speech development. A rating scale for classifying the total language functioning of the cerebral palsied child, determining the extent of the child's deficiency and the resulting handicap, is proposed. It establishes set values for varying degrees of handicaps--mild, moderate, severe and very severe. The area of expressive language is broken down into three categories--motor, speech, and other expressive behavior--and rated accordingly. It is hoped the scale will prove clinically helpful in obtaining a more detailed and complete picture of the language functioning of these children.

156. Spasticity in infants. Brit. Med. J. Nov. 5, 1955. 4948:1130-1131.

An editorial stressing the importance of early diagnosis in cerebral palsy, with a brief review of signs and symptoms indicating the presence of cerebral palsy in the infant. Reference is made to such authorities as Ingram, Gesell and Amatruda, Perlstein and Barnett.

#### CEREBRAL PALSY--MEDICAL TREATMENT

157. Eggers, G. W. N. (Dept. of Surgery (Ortho.), Univ. of Texas Med. School, Galveston, Tex.)

Selective surgery for the cerebral palsy patient. 11 p. Reprint.

In: Am. Acad. of Orthopaedic Surgeons Instructional Course Lectures. Ann Arbor, J. W. Edwards, 1955. v. XII, Ch. IX, p. 221-231.

Describes surgical techniques directed toward improvement of the upper and lower extremities of the cerebral palsy patient, indications and contraindications for surgery, and results to be expected. Illustrated.

See also 179.

#### CEREBRAL PALSY--SPECIAL EDUCATION

158. United Cerebral Palsy Associations (369 Lexington Ave., New York 17, N. Y.)

Your stake in education for cerebral palsied children; a guide for parents and laymen. New York, The Assns. (1954). 55 p.

An attempt to interpret to the layman a realistic school program for children with cerebral palsy, it explains the learning problems of these children, the need for educational planning based on special needs, where school services should be provided, supplementary services necessary in the good school program, objectives of education geared to individual needs and disability, the role of the community, voluntary organizations, and parents' groups in educational planning.

#### CEREBRAL PALSY--SPEECH CORRECTION

159. United Cerebral Palsy Associations (369 Lexington Ave., New York 17, N. Y.)

Realistic educational planning for children with cerebral palsy; speech therapy. New York, The Assns., c1954. 54 p. (Pamph. no. 7)

A pamphlet making available to those professionally concerned with care and treatment of the cerebral palsied child the experience and thinking of speech therapists and other professional workers who have dealt with problems of speech development in the cerebral palsied. While the discussion is intended to cover all age groups, the approaches suggested are particularly important in dealing with younger children. Points discussed are the evaluation of speech in the cerebral palsied, the multiphasic approach to speech therapy, parent guidance, cooperation of therapists, cooperation with agencies outside the clinic, and organization of the therapy program.

#### CEREBRAL PALSY--SURVEYS--TEXAS

160. Texas. Southern Methodist University. Department of Sociology

Agencies providing services and treatment to cerebral palsied persons in Dallas County, Texas, 1954-1955, by Walter T. Watson and Bruce M. Pringle. Dallas, The University, 1955. 23 p. Mimeo. (Cerebral Palsy Survey Fund; Research rep. no. 1)

Sponsored by United Cerebral Palsy of Dallas County, Texas.

A report of a study of facilities in Dallas County, Texas, which offer care, comfort, or rehabilitation to the cerebral palsied. Methods and findings of the study are discussed, and a directory of agencies describing type of services offered, location, sponsor and director of each is included. Also in the report is an index of services, a statistical breakdown of the number of cases in different age groups handled by various agencies, and the expression of views of agency representatives on adequacy of present services and unmet needs of the cerebral palsied in Dallas County.

Available from Cerebral Palsy Survey Fund, Dept. of Sociology, Southern Methodist Univ., Dallas 5, Texas.

#### CEREBRAL THROMBOSIS

161. Livingston, Kenneth E. (806 S. W. Broadway, Portland, Ore.)

Hemiplegia caused by cerebrovascular thrombosis; an arteriographic study, by Kenneth E. Livingston, Alfonso Escobar, and Gregory D. Nichols. J. Neurosurgery. July, 1955. 12:4:336-344. Reprint.

A brief review of literature pertaining to cerebrovascular thrombosis and the use of arteriography, with statistical data from studies by the authors

#### CEREBRAL THROMBOSIS (continued)

in a series of 30 patients with hemiplegic "stroke," all having histories and clinical findings entirely typical of a cerebrovascular thrombosis involving the cortical motor system. Data suggest that one difference between the "normal" and abnormal arteriogram groups is the seemingly greater potential for recovery in patients with "normal" arteriograms.

#### CHILD HEALTH

##### 162. Sever, Josephine Abbott

Johnny visits his doctor. Boston, Children's Medical Center, c1955.

30 p. illus.

A booklet by the Medical Information and Education Service of the Children's Medical Center, Boston, written to help parents familiarize children with what to expect on a visit to the doctor's office. Also includes hints for parents on the need for periodic examination of the child and the proper time for immunization shots. Simply written with appealing illustrations in color, it is intended to be read to the small child.

Available from Children's Medical Center, 300 Longwood Ave., Boston, Mass. at 50¢ a copy.

#### CHILDREN'S HOSPITALS

See 220.

#### CHRONIC DISEASE--INSTITUTIONS

See 258.

#### CLEFT PALATE

##### 163. Trusler, Harold M. (408 Hume Mansur Bldg., Indianapolis, Ind.)

The cleft lip-cleft palate problem, by Harold M. Trusler, Thomas B. Bauer, and John M. Tondra. Plastic and Reconstructive Surg. Sept., 1955. 16:3:174-188.

A preliminary report of an analysis of 750 cases of cleft lip-cleft palate operated upon in the past ten years at the Indiana University Medical Center. No numerical statistics are included, but observations on operations giving the best result in specific types of deformity are included. Also discussed are the proper age for surgery, the value of orthodontia as an adjunct in the rehabilitation of these cases, maldevelopments of maxilla and teeth, speech defects, and residual palatal defects.

#### CLUB FOOT

##### 164. Gunn, Ross E. (724 Story St., Boone, Iowa)

Early treatment of club feet and flat feet. Brit. J. Phys. Med. Dec., 1955. 18:12:273-278.

A report of an original method for the correction of club feet and flat feet. Several case histories illustrate the effectiveness of the method which accomplishes in weeks what has previously required years of treatment. The author states that mild cases require two months' treatment; severe cases may be cured in six months. Treatment, if done properly, is entirely painless.

#### CLUBS

See 206.

## CONFERENCE OF REHABILITATION CENTERS--PROCEEDINGS

### 165. U. S. Office of Vocational Rehabilitation

Workshop findings, Conference of Rehabilitation Centers, Third Annual Workshop, December, 1954. Washington, D.C., The Office, 1955. 27 p.

Reports of committees in the workshop, conducted at the Conference on Rehabilitation Centers, cover: The role of team members in a rehabilitation center. -Training for positions as rehabilitation center director, coordinator, or administrator. -A voluntary reporting system for rehabilitation centers. -Relationships between rehabilitation centers, vocational schools, and vocational rehabilitation agencies. -Relationships and affiliations of rehabilitation centers with medical schools and hospitals. -Recommended administrative practices for rehabilitation centers. -List of centers and individuals participating in the 1954 Workshop.

Available from Mr. Henry Redkey, Rm. 3321, 330 Independence Ave., S.W., Washington 25, D.C., at 50¢ a copy.

## CONVALESCENCE--INSTITUTIONS

See 258.

## CONVALESCENCE--RECREATION

### 166. Gould, Etta M. (Bellevue Hosp., New York, N.Y.)

A playroom helps children adjust to a hospital. Nursing World. Dec., 1955. 129:12:14-16, 26.

The playroom supervisor at Bellevue Hospital tells of the activities carried on in the playroom, various equipment, and how the hospitalized child's emotional needs are being met through the play program.

## DAY CAMPING

### 167. Held, Marian (111 E. 59th St., New York 22, N.Y.)

Day camp as a step toward integration. New Outlook for the Blind. Dec., 1955. 49:10:372-377.

The Director of Direct Services for the New York Assn. for the Blind describes an experiment in day camping with blind children. A camp site closely adjacent to one for sighted children was assigned the project, enabling integration of blind and sighted children in many camping activities.

## DEAF

### 168. Hedgecock, LeRoy D. (Mayo Clinic, Rochester, Minn.)

Speech and hearing problems of the young deaf child. Am. Annals of the Deaf. Nov., 1955. 100:5:435-445. Reprint.

A paper read at a meeting of the Parents Institute Nursery School, Michigan School for the Deaf, discussing ways in which deafness is first recognized in children, methods of testing the very young child for deafness, conditions often confused with deafness, differential diagnosis, the value of education for deaf children and the problems of developing speech in the deaf.

## DEAF--ASSOCIATIONS--PROCEEDINGS

### 169. Fauth, Bette La Verne

A study of the proceedings of the Convention of American Instructors of the Deaf, 1850-1949, by Bette La Verne Fauth and Warren Wesley Fauth.

Am. Annals of the Deaf. 9 pts.

Appeared in the Annals as follows: Part I, Mar., 1950.-II, May, 1950.

#### DEAF--ASSOCIATIONS--PROCEEDINGS (continued)

-III, Nov., 1950.-IV, Mar., 1951.-V, Sept., 1952.-VI, Nov., 1952.-VII, Nov., 1954.-VIII, Mar., 1955.-IX, Nov., 1955.

With this issue of the Annals, the thesis by Bette and Warren Fauth is concluded. Their purpose in presenting this study was to review educational theories, ideas on curricula, methods of teaching, qualifications of teachers, tests and research in education of the deaf, and to show the wealth of material in this reference source containing opinions of authorities in the field. Extensive bibliographies following each chapter provide references on all aspects of education of the deaf.

#### DEAF--EMPLOYMENT

170. Schowe, Ben M.

The deaf in industry. Bul., Gallaudet College. Oct., 1955. 4:2:3-13.

Together with: The place of the deaf in the community, by Ben M. Schowe. p. 14-24.

The Alumni Lectures of 1955.

Recruitment of deaf employees is discussed in the first article, with a consideration of some of the problems of placement, application of workmen's compensation laws, and discrimination of employers. In his second, Mr. Schowe comments upon difficulties which the deaf will have to overcome in order to be accepted in the business world and in the community.

Distributed by Gallaudet College, Kendall Green, Washington 2, D.C.

#### DEAF--MENTAL HYGIENE

171. Kallman, Franz J.

Objectives of the mental health project for the deaf. New York, The Author, 1955. 15 p. Mimeo.

Describes the objectives of the first Mental Health Project for the Deaf at the New York State Psychiatric Institute; organized in 1955, its proposed program of activities covers research, psychiatric guidance, and training of specialized guidance workers. Research data on personal and intra-family patterns of adjustment specific to the deaf will be sought and other studies dealing with the improvement of diagnostic and therapeutic procedures in the management of forms of maladjustment associated with the deaf will be carried out. Methods to be employed in the project are outlined.

Available from Editor, American Annals of the Deaf, Gallaudet College, Washington 2, D.C., at 25¢ a copy.

#### DEAF--PARENT EDUCATION

172. Bennett, Daphne Nicholson

Parents as teachers of the preschool deaf child. Exceptional Children. Dec., 1955. 22:3:101-103, 122.

A report of a research survey of parents of deaf children and their success or failure in carrying out instructions offered in the John Tracy Clinic Correspondence Course for the home instruction of deaf children. Basis of the data on factors which helped or hindered successful teaching by parents was correspondence and reports between 74 parents and the director of the course. The inquiry began with an assessment of methodology and emotional attitudes of parents. Implications of the study for parent education are discussed. The original study on which the article is based is available as a Ph.D. dissertation completed at the University of Southern California.

#### DEAF--PARENT EDUCATION (continued)

##### 173. Flaxman, George

Growing up with Marsha, by George and Ethel Flaxman. Volta Rev. Oct., Nov., & Dec., 1955. 57:8, 9, & 10. 3 pts.

An article based on a paper presented in 1955 at the Annual Parents' Institute, Illinois School for the Deaf, describing Dr. and Mrs. Flaxman's experiences involved in working with and living with a deaf child--six-year old Marsha, their daughter. Throughout the article, the Flaxmans stress the role of the deaf child's parents in providing guidance and an atmosphere of loving acceptance. They are the co-authors of a pamphlet published in 1951 by the Illinois State Dept. of Public Instruction, titled "Your Child is Deaf."

#### DEAF--SPECIAL EDUCATION--CALIFORNIA

##### 174. California. State Department of Education (Sacramento 14, Calif.)

A guide to the education of the deaf in the public schools of California, by Charles W. Watson. Sacramento, The Dept., 1955. 57 p. illus. (Bul., Calif. State Dept. of Education. Aug., 1955. 24:5)

A pamphlet written for schools and administrators faced with the problem of establishing and maintaining special education programs for deaf children in public school systems. It covers causes of deafness and types of hearing disabilities testing methods, a classification of types of deafness (multiple handicapped), education of the deaf and the parents' role, the hearing aid, aids in its selection, organization and operation of special day schools and day classes for the deaf, and agencies serving deaf children. A bibliography of books, pamphlets, periodicals, and films is included.

#### EPILEPSY

##### 175. Liberson, W. T. (V.A. Hosp., Northampton, Mass.)

Emotional and psychological factors in epilepsy; physiological background. Am. J. Psychiatry. Aug., 1955. 112:2:91-106. Reprint.

Reviewed are: Recent advances in seizure physiology, the functions of specific structures implicated in the physiology of emotions, and the general and specific mechanisms by which environmental stimuli may induce seizures.

#### FOOT

##### 176. Carlin, Eleanor J. (Jenkintown Gardens, Washington Lane, Jenkintown, Pa.)

Functional osteology of the foot. Phys. Therapy Rev. Dec., 1955. 35:12:715-719.

Points out how function relates to structure in the human foot. Obvious bony markings and basic factors of shape are reviewed along with the functional factors that may have been responsible. The concept is not limited to the area of the foot but can be applied to the entire skeletal system.

#### GOUT

##### 177. Kuzell, William C. (Stanford Univ. School of Med., San Francisco, Calif.)

Some observations on 520 gouty patients, by William C. Kuzell (and others). J. Chronic Diseases. Dec., 1955. 2:6:645-669.

A study re-evaluating the clinical characteristics of gout and placing the disorder properly in present-day diagnostic and therapeutic procedures.

#### GOUT (continued)

Clinical analysis of 504 examples of primary and 16 of secondary gout has been made. The coincidence of other diseases is noted, and cause of death in 18 patients is reported. Alcoholism and uremia were observed much less frequently than is commonly presumed. Drugs used in treatment are evaluated; undesirable side effects of various antigout agents are discussed.

178. Lockie, L. Maxwell (40 W. North St., Buffalo 2, N. Y.)

Present-day treatment of gout. Bul. Rheumatic Dis. Nov., 1955.  
6:3:97-98.

Symptoms suggesting a differential diagnosis of gout, treatment of gout in the acute attack and following the acute attack, and other suggestions on surgical care and diet for the gouty patient are discussed. Drugs used in treatment, their action and side effects, are evaluated.

#### HAND

179. Goldner, J. Leonard (Duke Hospital, Duke Univ. School of Med., Durham, N. C.)

Reconstructive surgery of the hand in cerebral palsy and spastic paralysis resulting from injury of the spinal cord. J. Bone and Joint Surg. Dec., 1955. 37-A:6:1141-1154, 1205.

A detailed discussion of the value of reconstructive surgery for hand deformities, indications for surgery, specific deformities and their treatment, and other factors influencing the use of surgery. In the cerebral palsied, however, the majority of deformities of the hand cannot be aided by surgery. Discussions of the paper by Dr. H. Relton McCarroll and Dr. William Cooper follow the article.

#### HANDICAPPED--STATISTICS

180. Delp, Harold A. (Training School, Vineland, N. J.)

How many exceptional children in your school? Training School Bul. Dec., 1955. 52:8:198-201.

Reprinted from: School Exec. Nov., 1955. 75:3.

Using statistics from the U. S. Office of Education as the basis for this article, Dr. Delp states that approximately 50 per cent of school children need special consideration for mental differences, more than 65 per cent have physical defects, and probably 50 per cent are so different educationally as to need special help. Areas of exceptionality are defined and ways of meeting these children's education needs are discussed briefly.

#### HARD OF HEARING--EQUIPMENT

181. The facts about hearing aid fitting; a panel discussion, by Jerome A. Hilger, Aram Glorig, Jr., and Werner Mueller. Trans., Am. Acad. Ophthalmology and Otolaryngology. Sept.-Oct., 1955. 59:5:617-629. (Dr. Hilger, 350 St. Peter St., St. Paul, Minn.)

A discussion by two prominent authorities in the special field of otology on the prescribing of hearing aids for the hard of hearing who cannot be helped by surgical, medical or prosthetic means. Criteria for determining patients who will benefit from the hearing aid, the importance of audiometry in evaluating hearing aid acceptance by the patient, and techniques used in testing are explained and compared.

#### HARD OF HEARING--PROGRAMS

182. Lederer, Francis L. (307 N. Michigan Ave., Chicago, Ill.)

Hearing conservation programs; their accomplishments and deficiencies, by Francis L. Lederer, Marion Quinn, and Mary T. Neville. J. School Health. Dec., 1955. 25:10:292-298.

Basic elements of an overall plan for a hearing conservation program, carried out as part of a well-rounded school health program, are outlined and criteria for the evaluation of such a program are suggested. A summary of the accomplishments and deficiencies that are an outgrowth of the hearing conservation program in the Chicago Public Schools is included. Types of programs used in Chicago may not serve the best interests of the smaller city or small rural community, but general advantages and disadvantages are applicable to any program.

#### HARD OF HEARING--PSYCHOLOGICAL TESTS

183. Reynolds, Lyle Gordon (Santa Barbara Coll., Univ. of Calif., Santa Barbara, Calif.)

The school adjustment of children with minimal hearing loss. J. Speech and Hear. Disorders. Dec., 1955. 20:4:380-384.

Based on a doctoral dissertation completed at Stanford University, this article reports a study to determine whether children with minimal hearing impairment (below an average loss of 30 decibels) have more difficulty in establishing suitable goals of personal and social adjustment than normally hearing children. Results indicated a failure to demonstrate significant statistical difference between scores of the two groups on the measures of school adjustment. Other problems in the hard-of-hearing child's environment would seem to have more bearing on the child's school adjustment than minimal hearing loss. All hard-of-hearing subjects in this test had received instruction in lip reading for a considerable time which may have been an important factor in the school adjustment.

#### HEART DISEASE--MEDICAL TREATMENT

184. Kaufman, Jerome G. (229 Clinton Ave., Newark 8, N.J.)

Rehabilitation of the patient with myocardial infarction, by Jerome G. Kaufman and Marvin C. Becker. Geriatrics. Aug., 1955. 10:8:355-361. Reprint.

Gives a brief review of the literature in relation to effort in the production and progression of the disease process, the phases of the rehabilitation process, and the employment outlook for the cardiac patient.

#### HEART DISEASE--MENTAL HYGIENE

185. Ivey, Evelyn Parker (24 Elm St., Morristown, N.J.)

Emotional factors in children with heart disease. J. Med. Soc. N. Jersey. Dec., 1954. 51:11:523-527. Reprint.

An understanding of the way in which illness and disability affect children is necessary in parents and all professional personnel dealing with the ill child. Emotional needs of the child with heart disease are reviewed; the effect of parents' attitudes toward the child's illness and disability are explained. Dr. Ivey stresses the need for preventive mental hygiene for all children experiencing illness or physical disability.

#### HEREDITY

186. Kloepfer, H. Warner (Tulane Univ. School of Med., New Orleans, La.)  
Heredity counseling; starting a heredity clinic. Eugenics Quart. Dec., 1955. 2:4:234-238.

Stresses the need for more genetic counseling clinics and the requirements for developing a new center. Experiences at the Tulane University Center illustrate one approach to the establishment and operation of a clinic for genetic counseling. Discussed are location, physical facilities, personnel, financing, and types of services.

187. Mohr, Jan (Laboratory of Human Genetics, Oslo Univ., Oslo, Sweden)  
European heredity registers. Eugenics Quart. Dec., 1955. 2:4:198-204.

Suggests ways in which heredity registers have been or may be useful, possible sources of information for such registers, and the circumstances under which it may be possible to achieve efficient registration. Experience in Norway, Denmark, and Switzerland are cited to illustrate the progress in establishing registers.

#### HIP--DISLOCATION

188. McCarroll, H. R. (3720 Washington Blvd., St. Louis, Mo.)  
Congenital dislocation of the hip after the age of infancy. 21 p. Reprint.  
From: Am. Acad. of Orthopaedic Surgeons Instructional Course  
Lectures. Ann Arbor, Mich., J. W. Edwards, 1955. Ch. III, p. 69-89.  
A discussion of various types of treatment used and results which may be expected in congenital dislocation of the hip in patients beyond the age of infancy (walking age to eight years and above). Diagnosis, classifications and differentiation of clinical types of dislocation, treatment, and radical reconstructive measures for individuals in whom the initial treatment has failed are covered. Fourteen cases are illustrated by x-ray plates.

#### HYDROTHERAPY

189. Cully, William E. (V. A. Hosp., Coatesville, Pa.)  
A therapeutic pool program for acutely disturbed psychotic patients.  
J. Assn. Phys. and Mental Rehab. Nov.-Dec., 1955. 9:6:193-195.  
Techniques and procedures used in the hydrogymns at the V. A. Hospital, Coatesville, are described. The program has physiological and psychological values in the total treatment of the patient.

190. McClellan, Walter S. (Univ. of N. Carolina Med. School, Chapel Hill, N.C.)  
Spa therapy and rehabilitation for the aged. Geriatrics. July, 1955. 10:7:333-336. Reprint.

An evaluation of spa therapy for impaired cerebration, circulation, locomotion, and elimination--major problems in many geriatric patients. The author states that this treatment is constitutional, mediated through the autonomic nervous system, and contributes to both mental and physical rehabilitation of the geriatric patient through the more normal functioning of various organ systems. The economic and physiologic aspects of spa therapy are considered.

#### INSURANCE (SOCIAL)--SWEDEN

191. Persson, Konrad (Royal Board of Pensions, Stockholm 17, Sweden)

Social welfare in Sweden; a summary account of the more important sections of the present legislation on social insurance and social assistance. Stockholm, Sweden, Royal Board of Pensions, 1955. 26 p. tabs., graphs. Photo offset.

Published also in German, French and Spanish editions.

An explanation of the National Pensions scheme in force in Sweden and covering old-age, invalidity, and widow's pensions as well as various allowances supplementing pensions. Insurance benefits covering sickness and medical care, maternity, industrial injuries, and unemployment are provided under national legislation. Administration of the various pension and insurance schemes is described briefly. Statistical data on percentage distribution of causes of disability in Sweden are included.

#### LARYNGECTOMY

192. Martin, Hayes (737 Park Ave., New York 21, N. Y.)

Speech rehabilitation following laryngectomy; general considerations.

Talk. Dec., 1955. 36:4:4-6.

In same issue: White, Willard. Speech rehabilitation following laryngectomy; the role of the therapist, p. 7-8. -Heaver, Lynwood (and others). Clinical experience with 274 laryngectomized patients, p. 9-10, 13.

A discussion of the psychological preparation for laryngectomy, speech re-education and mechanical aids in re-learning speech, the basic mechanism of esophageal speech and the therapist's role in the rehabilitation of the laryngectomee. The third article on the subject covers conclusions drawn from an analysis of data on the psychological and physiological problems associated with the operation and rehabilitation of the laryngectomee. Subjects were patients at the post-laryngectomy clinic at the National Hospital for Speech Disorders.

#### LEG

193. Nichols, P. J. R.

The accuracy of measuring leg-length differences; an "observer error" experiment, by P. J. R. Nichols and N. T. J. Bailey. Brit. Med. J. Nov. 19, 1955. 4950:1247-1248.

Assessment of differences in leg length is important in many aspects of medicine; the technique is taught to all medical students. The present investigation into the measurement of leg lengths found differences between four observers making estimates on 50 patients. "Analysis of variance show that the difference between observer means is significant at the 5% level.... Greater accuracy could be achieved by taking the average of several independent readings.... The overall degree of accuracy of measurement of leg lengths is such that differences of 1/2 in. (12.5 mm.) or more may be accepted as diagnostically significant, but differences of less than 1/2 in. are not reliable unless based on the average of at least four measurements."

#### MENTAL DEFECTIVES--BIBLIOGRAPHY

194. National Association for Retarded Children (99 University Pl., New York 3, N. Y.)

A basic library on mental retardation. New York, The Assn., 1955. 8 p. A short bibliography of books, pamphlets, and periodicals on mental

#### MENTAL DEFECTIVES--BIBLIOGRAPHY (continued)

retardation for the guidance of local associations for retarded children, lay groups or agencies interested in parent education, or local public libraries wishing to establish a well-rounded collection of material on the various aspects of the subject for general use. Emphasis is on recent material.

Available from the Association at 10¢ a copy.

#### MENTAL DEFECTIVES--ETIOLOGY

See 239.

#### MENTAL DEFECTIVES--INSTITUTIONS

195. Smith, H. W. (Alexandra Institution, Maitland, Cape, S. Africa)

At what age should the very young mental defective be sent to an institution? S. African Med. J. Dec. 3, 1955. 29:49:1142-1145.

A growing tendency to institutionalize very young mental defectives in the Union of South Africa, and the divergency of medical opinions on the proper time for institutionalization, led to a survey of 32 infants on the register of the Health Department of the Union Government. In this article 3 brief case-studies selected from the original 32 illustrate the many schools of thought and practice in the disposal of cases of young mental defectives. In conclusion, a few guiding principles for selection of the time of institutionalization are suggested.

#### MENTAL DEFECTIVES--MEDICAL TREATMENT

196. Bair, H. V. (Parsons State Training School, Parsons, Kan.)

Efficacy of chlorpromazine in hyperactive mentally retarded children, by H. V. Bair and William Harold. Arch. Neurol. and Psychiatry. Oct., 1955. 74:363-364. Reprint.

A report of an investigation of the effect of chlorpromazine (Thorazine) on hyperactive mentally retarded children at Parsons State Training School. Ten students who could not seem to make the minimum adjustment to classroom tasks were subjects of the test. Highly favorable reports were submitted on eight students by teachers, therapists, and job supervisors, indicating a significant increase in attention spans, a phenomenal increase in I. Q., and the removal of severe emotional and nervous disorders which had previously prevented students from functioning at their true level of mental ability.

#### MENTAL DEFECTIVES--SPECIAL EDUCATION

197. MacGown, Evelyn F.

Stevie's teacher gave more than was required to a little retarded child. N. E. A. J. Dec., 1955. 44:9:542-543.

The mother of a retarded child tells appreciatively how Stevie's kindergarten teacher kept him busy, happy and relaxed in class. He was allowed to proceed at his own pace, was encouraged in the activities in which he showed ability, and was accepted and included in all classroom activities.

198. Pennsylvania. PARC Training School for Retarded Children, Philadelphia (555 E. Adams Ave., Philadelphia 20, Pa.)

A syllabus on a curriculum for the retarded child, written by the staff of the.... Philadelphia, The School, 1955. 35 p. Mimeo.

Largely the record of events and experiences in the school, now in its fourth year, this syllabus covers the work of the nursery school program,

#### MENTAL DEFECTIVES--SPECIAL EDUCATION (continued)

regular class program, and the home training program for children unable to attend class because of degree of retardation, physical disability or emotional disturbance. The School was established to meet the needs of mentally retarded children not being served by any school; pupils have mental retardation with accompanying physical disabilities. Also discussed in this booklet are work with parents and the community's role in helping retarded children.

#### MENTAL DEFECTIVES--SPECIAL EDUCATION--TENNESSEE

199. Sparkes, Benwah Kail (Tenn. Dept. of Education, Nashville 3, Tenn.)  
Classes for the mentally retarded. Tenn. Public Welfare Rec. Dec., 1955. 18:6:103-105, 108.

A report on the administration of Tennessee's newest educational program--classes for mentally retarded children, believed to be the first state-wide program of this type ever attempted. Discusses financial provisions under the limited program approved by the General Assembly, State Board of Education regulations governing the classes' administration, and co-operation with the Tennessee Council for Retarded Children.

#### MENTAL DISEASE

See 189; 190.

#### MENTAL DISEASE--EMPLOYMENT

200. Stotsky, Bernard A. (1223 Warren Ave., Brockton, Mass.)  
Predicting success on the member-employee rehabilitation program.  
J. Consulting Psych. Aug., 1955. 19:4:274.

A brief report of the Member-Employee program instituted in neuro-psychiatric Veterans Administration hospitals to aid in rehabilitating chronic hospitalized psychotics, and psychological tests used in an attempt to predict success on the program. Of all the tests used only 3 of the biographical items differentiated the successful from unsuccessful members of the program. Two main reasons for failure on the program were exacerbation of psychotic symptoms and overindulgence in alcohol. It would appear, then, that alcoholics and unstabilized psychotics are poor prospects for admission to this type of program.

#### MENTAL HYGIENE

See 218.

#### MONGOLISM--SOUTH AFRICA

201. Kaplan, B. J.  
Mongolism in the Bantu, including a case report. S. African Med. J. Nov. 5, 1955. 29:45:1041-1043.

"A case of mongolian idiocy in a Bantu child is described. The rarity of this condition in the South African Native is emphasized and reasons are discussed. The literature in this connection is reviewed. This rarity is probably not accounted for by a high mortality rate. Racial, environmental, and dietetic factors in the aetiology of mongolism cannot yet be considered to have been excluded."--Summary.

#### MULTIPLE HANDICAPS

See 198.

#### MUSCLES

202. Barnett, C. H. (St. Thomas' Hosp. Med. School, London, England)  
The activity of antagonist muscles during voluntary movement, by  
G. H. Barnett and D. Harding. Annals Phys. Med. Oct., 1955. 2:8:290-  
293.  
". . . The present experiments were undertaken to determine the behavior of antagonist muscles in man when the prime mover is acting against moderate resistance and the joint is being moved rapidly. . . ." Methods and results of the experiment are discussed.

#### MUSCULAR DYSTROPHY

203. Horvath, B. (Dr. G. M. Shy, Natl. Institute of Neurological Diseases and Blindness, Bethesda 14, Md.)  
Muscular dystrophy; cation concentrations in residual muscle, by B. Horvath (and others). J. Applied Physiology. July, 1955. 8:1:22-30.  
Reprint.

Together with: Berg, L. (and others). Muscular dystrophy; blood content of dystrophic muscles, p. 31-32. -Shy, G. M. (and others). Muscular dystrophy; potassium exchange in residual muscle, p. 33-36.

A series of articles reporting on laboratory findings of clinical investigations in muscular dystrophy. The first article deals with methods and results derived from such methods of determining the amount of potassium found in residual muscle fibers of biopsied tissue obtained from dystrophic patients. The second describes a simple method of determination of the per cent blood of biopsied tissue; it was found that blood volume of dystrophic muscles does not vary from that of normal muscle. The third describes methods and results of potassium exchange studies in a series of 12 patients with muscular dystrophy and 3 control subjects. The method measures the amount of potassium exchanged in 22 hours in the whole human body.

#### MUSIC THERAPY

204. Kaplan, Max (Univ. of Ill., Urbana, Ill.)  
Music therapy in the speech program. Exceptional Children. Dec., 1955. 22:3:112-117.  
An article adapted from the final report submitted by the writer to the University of Illinois Speech Department in the summer of 1953, concerned with the part played by music therapy in the residential center's summer speech program for children with speech and hearing problems stemming from organic impairments of various kinds. Objectives and procedures of the use of music therapy are described.

The article is one chapter of a book by the writer titled "Music in Recreation; Social Foundations and Practices," published by Stipes Publishing Co., Champaign, Ill.

#### NEPHROSIS

205. Riley, Conrad M. (622 W. 168th St., New York 32, N. Y.)  
Childhood nephrosis, by Conrad M. Riley and Ruth Alice Davis. Pediatric Clinics N. Am. Aug., 1955. p. 893-910. Reprint.  
Discusses the etiology, pathology, clinical picture and laboratory findings, research on the disease, diagnosis and prognosis, medical treatment, hormone therapy, the management of renal failure, and management of parents.

#### NURSING--PERSONNEL

206. National League for Nursing (2 Park Ave., New York 16, N.Y.)

Program guide for future nurses clubs. New York, The League, 1955. 80 p. illus. 50¢.

A pamphlet published by the Committee on Careers of the National League for Nursing, intended for the guidance of Future Nurses Clubs in high schools. It offers information on organizing such clubs, programs and projects to be undertaken, and activities on a city-wide or state-wide level. Advisors and sponsors of clubs will find this outline of purposes and activities helpful in guiding their groups.

See also 217.

#### OCCUPATIONAL THERAPY--ADMINISTRATION

207. Sokolov, June (680 Franklin Ave., Hartford 6, Conn.)

Working as a team; the occupational therapist in a rehabilitation center. Am. J. Occupational Ther. Nov.-Dec., 1955. 9:6:270-271, 296.

Distinctive skills and functions of the occupational therapist are classified broadly in this interpretation of the therapist's role on the rehabilitation team. As a skilled observer, the therapist evaluates and records responses of the patient, plans and administers treatment, assists in the social adjustment of patients. Qualifications necessary for the therapist to become a valuable team member are discussed briefly.

#### OCCUPATIONAL THERAPY--STUDY UNITS AND COURSES

208. Smith-Rose, Mary

Student training in occupational therapy. Occupational Ther. Nov., 1955. 18:4:146-156.

A discussion of the revised syllabus of training for the Diploma of the Association of Occupational Therapist in Great Britain, the aims of student training in this field, and how they may best be attained. Aspects of recruitment, selection of students, cooperation of school staffs and hospital occupational therapists, use of outside facilities in training, teaching methods, teaching practice for students, and the acquisition of skills are discussed.

In same issue: Rehabilitation: A report on the post-graduate study course held from 2nd-6th May, 1955, p. 169-174. The article contains digests of talks on rehabilitation of the physically and psychologically handicapped, the D.R.O. service and the contribution of the occupational therapist, and findings of specialist groups.

#### OLD AGE--INSTITUTIONS

209. Methodist Church. Board of Hospitals and Homes (740 Rush St., Chicago 11, Ill.)

Sheltered care for older persons; standards and suggestions. Chicago, The Board, c1955. 70 p. \$1.00.

A book of standards to aid in the establishment of new homes for older people and to enable homes already established to review their methods of operation, admission, and service. It covers fully details of preliminary planning, location, types of physical facilities, personnel, financing, admission requirements, nutrition, medical and health services, and social and cultural activities. Various forms for articles of incorporation, by-laws, application for admission, and life care agreements are included.

#### OLD AGE--INSTITUTIONS--NORTH CAROLINA

210. North Carolina. State Board of Public Welfare (Raleigh, N.C.)  
Residents of North Carolina's licensed homes for adults; a survey, by  
Annie May Pemberton and Robert Mugge. Raleigh, The Board, 1955.  
72 p. charts (Information bul. no. 27) Mimeo.  
A report of a survey of all licensed boarding homes for the aged and  
disabled in North Carolina, made to evaluate accomplishments of the  
licensed boarding home program of the State Department of Public Welfare.  
Includes a description of the program with statistical data on the homes and  
their residents, rules and regulations governing licensing, and the inter-  
view schedule used in the survey.

#### OLD AGE--MEDICAL TREATMENT

211. Krauss, Theodore C. (723 W. Delavan Ave., Buffalo 22, N.Y.)  
The role of comprehensive rehabilitation in the care of the geriatric  
patient, by Theodore C. Krauss, Henry V. Morelewicz, and Louis Dozoretz.  
N. Y. State J. Med. Aug. 15, 1955. 55:16:2331-2335. Reprint.  
Rehabilitation of the geriatric patient calls for the team approach; the  
author cites the example set forth by the Geriatric Clinic of the E. J.  
Meyer Memorial Hospital, Buffalo, N.Y., to illustrate how principles of  
rehabilitation are applied. Various forms of therapy employed with the  
physically or mentally impaired older patient are described. Families  
of mental patients need social service to adjust to the problems which these  
patients present in their care.

212. New York. Albany County Department of Public Welfare

Rehabilitation of older people; proceedings, second annual Capital  
District Conference on Aging. Albany, The Dept., 1955. 17 p.

Reprinted from: N. Y. State J. Med. July 15, 1955. 55:14:2026-2040  
and Aug. 1, 1955. 55:15:2200-2201.

Contents: Social rehabilitation of the older person, Ollie A. Randall.  
-The economic aspects of rehabilitation of the older person, A. Ryrie Koch.  
-Food; the key to health, John H. Browe. -Cardiovascular rehabilitation of  
geriatric patients, Raymond Harris. -Psychiatric aspects of geriatric re-  
habilitation, Eugene Davidoff.

213. Rapp, V. W. (V.A. Hosp., Tomah, Wis.)

Physical medicine and rehabilitation on a geriatric ward. J. Am.  
Geriatrics Soc. July, 1955. 3:7:463-466. Reprint.

Describes an on-the-ward activities program for patients in geriatric  
wards; physical medicine and rehabilitation activities were initiated by a  
corrective therapist and an occupational therapist. Main objective of the  
program was the motivation of patients who had been on the ward for years;  
begun on an individual basis, the program gradually developed into a group  
project. Psychological changes due to senility or extended periods of  
hospitalizations presented difficulties.

#### OLD AGE--PHYSICAL THERAPY

See 190.

#### PARALYSIS AGITANS--MEDICAL TREATMENT

214. Cooper, Irving S. (St. Barnabas Hosp. for Chronic Diseases, 183rd St. & 3rd Ave., New York 57, N. Y.)

Chemopallidectomy; a neurosurgical technique useful in geriatric parkinsonians, by Irving S. Cooper and Nicolas Poloukhine. J. Am. Geriatrics Soc. Nov., 1955. 3:11:839-859. Reprint.

"... The salutary effects of anterior choroidal artery occlusion in patients under the age of 55 led (the authors) to seek a means of producing similar results in the older age group of parkinsonian patients, with procedures which would not carry a great risk. Studies over the past two years have led to the development of a technique which appears to fulfill this need...." Rationale, operative technique, results in seventy chemo-pallidectomies, and complications are described here. Included are 17 illustrations and 5 case histories.

#### PARAPLEGIA

215. Talbot, Herbert S. (V.A. Hosp., West Roxbury, Mass.)

Understanding the paraplegic. J. Assn. Phys. and Mental Rehab. Nov.-Dec., 1955. 9:6:186-188.

A brief survey of the direct neurological and extraneurological manifestations of spinal cord injury, their treatment and effect on rehabilitation. All problems resulting from the various disorders must be viewed as a whole and all treated concurrently. Study and treatment must be integrated.

#### PARAPLEGIA--FRANCE

216. Readaptation. Nov., 1955. 24.

Entire issue devoted to the subject.

Contents: Editorial, A. Buron. -Avant-propos, M. Fevre. -Resultats d'ensemble du traitement actuel des traumatismes de la moelle, D. Mahoudeau, Lapresle. -Le Centre de traitement et de readaptation des paraplegiques Cl. de l'Institution Nationale des Invalides, J.-L. Labrousse. -Les facteurs de pronostic, A. Grossiord. -Le probleme neurochirurgical dans les traumas-tismes de la moelle, M. -R. Klein. -Le probleme urinaire, G. Pelot. -L' appareillage, Ch. E. Abadie. -Le probleme orthopedique, J. Lagrange. - Aspects de la reeducation dans les paraplegies traumatiques, J. Hindermeyer. -Considerations sur la pratique de la reeducation physique et de l'appareil-lage au Centre de traitement de l'I. N. I., F. -L. -M. Kerboeuf. -Les escarres, J. Benassy. -Les petits soins, M. Maury. -Le reclassement, P. Grosse. - Le droit de vivre, S. Fouche. -Temoignages: Une experience de vie fami-liale, R. Hsia, R. Gueron. -La vie des Centres estrangers, R. Guicharnaud.

#### PARENT EDUCATION

217. Auerbach, Aline B. (Child Study Assn. of America, 132 E. 74th St., New York 21, N. Y.)

Public health nursing and parent education; a pilot project of training for parent group leadership. Am. J. Public Health. Dec., 1955. 45:12:1578-1589.

A report of an experimental program of 15 selected public health nurses in the training for leadership of discussion groups for parents, undertaken by the Child Study Assn. of America in 1954. Methods, objectives, and evalua-tion of the program are discussed. Current projects of a similar nature under the New York State Department of Health are mentioned briefly.

#### PARENT EDUCATION (continued)

218. Meier, Elizabeth G.

When your child asks embarrassing questions. Parents' Mag. Jan., 1956. 31:1:41, 67-68.

For parents faced with the problem of answering a child's questions when he sees a person who is severely handicapped, mentally deranged, intoxicated or, in some startling way, different from the normal person, this article suggests replies based on an understanding of children as well as consideration of the handicapped person.

#### PEDIATRICS

219. Startzman, Viola (2029 E. 93rd St., Cleveland 6, Ohio)

Developmental retardation due to urologic disease, by Viola Startzman and William J. Engel. Pediatric Clinics N. Am. Aug., 1955. 2:3:871-878. Reprint.

A consideration of the problem of growth failure due to urologic disease, prognosis in both severe, extensive congenital anomalies of the urinary tract, and in minor congenital anomalies compatible with life but influenced by super-imposed infection. Adequate and constant treatment of infection often will reverse growth failure and offer a favorable prognosis for growth and life.

220. Wallace, Helen M. (125 Worth St., New York 13, N. Y.)

Role of pediatrician and hospital care of orthopedically handicapped child, by Helen M. Wallace, Robert S. Siffert, and Jerome S. Tobis.

J. Am. Med. Assn. Dec. 24, 1955. 159:17:1607-1610.

"... This report describes the functioning of the pediatrician in the hospital care of orthopedically handicapped children in a large urban area. It raises the question as to why his role has been a minor one and suggests means by which this all important component of handicapped children's care can be greatly strengthened...." A review of the pediatrician's role, based on a team survey of 25 children's hospital orthopedic services in New York City, indicates surprisingly little pediatric participation. Three basic medical specialties, represented by the orthopedic surgeon, the pediatrician, and the physiatrist, are necessary for care and rehabilitation of these children for which a "team" approach is valuable.

#### PHYSICAL EDUCATION

221. Kelly, Ellen (Univ. of Oklahoma, Norman, Okla.)

Excuse the pupil or adapt the program? J. Health, Phys. Educ., Recreation. Dec., 1955. 29:6:21-22.

Discusses some of the common reasons for quasi-medical excuses from physical education, ways of eliminating them, justified excuses, outcomes of the adapted program and essentials for its success.

#### PHYSICAL EXAMINATION

222. Keatings, Gerald F.

A review of the work of a medical interviewing committee. Brit. J. Phys. Med. Dec., 1955. 18:12:263-266.

Defines the organization and objectives of medical resettlement clinics and reviews the work of the Derby Medical Interviewing Committee (Derbyshire Royal Infirmary, England) for 1952-53. An analysis of disabilities

#### PHYSICAL EXAMINATION (continued)

encountered in 75 people interviewed during this time is given, with an analysis of recommendations of the Committee. The present state of the 75 interviewed reveals 44% employed, 24 (37.3%) ill, and 4 deceased. Only 9 (12%) of those originally seen are unemployed.

#### PHYSICAL THERAPY

##### 223. Great Britain. Royal Society of Medicine

The use and abuse of physiotherapy. Annals Phys. Med. Oct., 1955. 2:8:294-298.

A summarization of a discussion, held at a meeting of the Physical Medical Section of the Royal Society of Medicine in 1954, on the place of physiotherapy in medicine. Dr. A. C. Boyle spoke on physiotherapy in the treatment of rheumatic, chest, and neurological diseases. Others voicing opinions were Drs. G. Blair, A. T. Richardson, F. S. Cooksey, G. Storey, W. Russell Grant, and D. Wilson; all agreed that there was need for the scientific investigation of physiotherapeutic procedures, abandoning useless procedures, and the unwise use of physical techniques which aggravated various disease conditions.

#### POLIOMYELITIS--MEDICAL TREATMENT

##### 224. Rae, James W., Jr. (1313 E. Ann St., Ann Arbor, Mich.)

Rehabilitation of the poliomyelitis respirator patient. Univ. of Mich. Med. Bul. June, 1955. 21:6:179-185. Reprint.

A discussion of factors which determine the greatest degree of restoration possible, ways of preventing deformity, physical therapy measures, the use of various types of splints, supports, braces, and feeders, and a brief mention of home care.

#### POLIOMYELITIS--OCCUPATIONAL THERAPY

##### 225. Dargan, Frank P.

Occupational therapy for the poliomyelitic. Am. J. Occupational Ther. Nov.-Dec., 1955. 9:6:272-277.

Discusses briefly the causes and symptoms of poliomyelitis, pointing out its resemblance in the early stages to influenza. The occupational therapy program, through all stages of the disease, is considered and two case histories demonstrate the need for continual observance of muscle imbalance and the need for awareness of changes in corrective splints. Occupational therapy can do much to make it easier for the patient to live with his disability.

#### POLIOMYELITIS--PHYSICAL THERAPY

##### 226. Bartenieff, Irmgard (Blythedale Rehab. Center, Valhalla, N.Y.)

Functional approach to the early treatment of poliomyelitis. Phys. Therapy Rev. Dec., 1955. 35:12:695-710.

Gives a detailed description of a technic of stretching in poliomyelitis, using the sit-up as a basic stretching exercise, but modified according to a functional analysis of the patterns of pelvis-hip-knee motions. Specific problems in treating tightness of muscles are discussed in the second part of this article. Part III considers the use of functional patterns for release of tightness in the shoulder and arm areas. Measures for alleviating pain and minimizing secondary protective pain tension are discussed. A detailed description of straight and spiral patterns used in stretching is presented. Illustrated.

#### PREGNANCY .

227. Horn, Paula (1930 Wilshire Blvd., Los Angeles 57, Calif.)

Poliomyelitis in pregnancy; a twenty-year report from Los Angeles County, California. Obstet. & Gynec. Aug., 1955. 6:2:121-137. Reprint.

"... a 20-year report, 1934-53 inclusive, of 325 pregnancies among 16,268 cases of poliomyelitis in Los Angeles County during these years, with a mortality rate of 5.2 per cent (17 deaths) in pregnancy..." Data are given on incidence, mortality, effect of the time element in pregnancy on the course of the disease, fetal loss and defects, method of delivery, and management of pregnancy. Factors complicating pregnancy in patients who had an attack of poliomyelitis in previous years are discussed.

#### PSYCHIATRY

228. Beigler, Jerome S. (5630 Kenmore Ave., Chicago 40, Ill.)

Experience of a psychiatric consultant in a state vocational rehabilitation program. Psychiatric Quart. Apr., 1955. 29:2:250-261. Reprint.

A brief review of the psychiatric rehabilitation program currently in operation at the Illinois Division of Vocational Rehabilitation which provides consultation on general rehabilitation problems and subsidized short-term psycho-therapy with private psychiatrists for medically-indigent patients. Administrative and clinical problems encountered are outlined. Statistics on results are given and the effects of subsidization are discussed.

#### PSYCHOLOGICAL TESTS

229. Mill, Cyril R. (407 N. 12th St., Richmond, Va.)

The measurement of primary mental abilities by the Columbia Mental Maturity Scale, by Cyril R. Mill and Charles J. Turner. J. Consulting Psych. Dec., 1955. 19:6:472.

A brief report of a study of the use of the Columbia Mental Maturity Scale as a measurement of primary mental ability; results indicate the Scale measures reasoning and verbal meaning even though it is a nonverbal test. While not sufficiently valid at present for clinical use, with further refinement it could fill a real need for a quick I.Q. measure for both normal and afflicted children, the authors believe.

An extended report of this study may be obtained from Dr. Cyril R. Mill.

#### PUBLIC HEALTH

230. Hilleboe, Herman E. (N. Y. State Dept. of Health, Albany, N. Y.)

Public health in a changing world. Am. J. Public Health. Dec., 1955. 45:12:1517-1524.

In his presidential address to the American Public Health Association, Dr. Hilleboe refers in particular to the challenges presented by chronic disease, mental and emotional disorders, demands for medical rehabilitation, and the need for evaluation of programs directed toward meeting these and other public health needs.

#### PUBLIC WELFARE--GREAT BRITAIN

231. Pinchin, John J.

A county welfare service. Soc. Service Quart. Dec., 1955-Feb., 1956. 29:3:133-138.

The Welfare of the Disabled. No. 13.

Describes welfare services administered by the new independent County

PUBLIC WELFARE--GREAT BRITAIN (continued)

Welfare Committee of Nottinghamshire, England, in the discharge of its National Assistance Act functions in regard to the blind, deaf and hard of hearing, and the physically disabled. The wide use of voluntary organizations and their services is discussed.

REHABILITATION

232. Rehabilitation. J. Am. Med. Assn. Dec. 17, 1955. 159:16:1540.

An editorial.

Stresses the need for expanding rehabilitation facilities, the difficulties in treating the suddenly disabled patient, the accomplishments of rehabilitation services, the economic and psychological values of rehabilitation, and the need for wider understanding among professional personnel of what rehabilitation services can offer in the care and support of the chronically disabled.

233. Wing, M. Naomi (235 Macquarie St., Sidney, Australia)

Medical rehabilitation. Med. J. Australia. May 14, 1955. 42:1:120: 705-710. Reprint.

A discussion of the necessity for rehabilitation, the organization of rehabilitation centers, parents' eligibility for rehabilitation services, some of the techniques employed and their results. Dr. Wing visited a number of rehabilitation centers in the United States and Great Britain from which experience she gathered much background information on rehabilitation techniques.

See also 230; 231.

REHABILITATION--PROGRAMS

234. Grant, Murray (Clay Co. Health Dept., Liberty, Mo.)

How one health department helps the handicapped. Public Health Rep. Dec., 1955. 70:12:1201-1204.

Describes the rehabilitation program undertaken and the out-patient rehabilitation clinic set up by the Cattaraugus County, N. Y., Health Department. Organization of the clinic, publicity, coordination of services, and results of the program are discussed.

235. Western European Union Joint Committee on Rehabilitation and Resettlement of the Disabled. Brit. J. Phys. Med. Dec., 1955. 18:12:282-283.

A report on the work of the Western European Union's Joint Committee on Rehabilitation and Resettlement of the Disabled and how it has helped to set standards and further the knowledge of care and treatment of the disabled in the five countries participating in the Union. Some of the Committee's recommendations on various aspects of rehabilitation are included.

REHABILITATION CENTERS--ADMINISTRATION

See 165; 222.

## REHABILITATION CENTERS--DESIGNS AND PLANS

236. U. S. Office of Vocational Rehabilitation (Washington 25, D.C.)

The prevocational unit in a rehabilitation center; an effective tool for evaluating work potential of the handicapped. Washington, D.C., The Office, 1955. 22 p. Mimeo.

Prevocational activities, as described in this manual, are of a specific nature directed toward evaluation of the patient's vocational potentialities. This guide on the purpose, organization, and program planning for a prevocational unit in the rehabilitation center discusses the work of the unit, the equipment necessary for testing of aptitudes in various work operations, safety precautions for protection of workers in the unit, the use of reports and records on patient performance. A suggested floor plan for such a unit is included, as well as lists of resource material and a bibliography.

## RELAXATION

237. Jones, Herbert H. (Veterans Home and Hosp., Rocky Hill, Conn.)

A programme of practical relaxation. Brit. J. Phys. Med. Dec., 1955. 18:12:267-270.

The training program at the Commission on the Care and Treatment of the Chronically Ill, Aged, and Infirm, Rocky Hill, Conn., is outlined and some of the methods of reaching relaxation are reviewed.

## RHEUMATIC FEVER--PARENT EDUCATION

238. U. S. Children's Bureau (Washington 25, D.C.)

The child with rheumatic fever. Washington, D.C., Govt. Print. Off., 1955. 13 p. (Children's Bur. folder no. 42-1955)

This new bulletin describes to parents the preventive value of early treatment in rheumatic fever and also the value of sulfa and penicillin in warding off recurrent attacks. Danger signs pointing to an attack of the disease are described. Particular emphasis is placed on prevention through early diagnosis and treatment by a physician, and the parent is helped to an understanding of the importance of the child's convalescence. Ways for keeping the child happy and interested while in bed are suggested.

## RUBELLA

239. Kirman, Brian H. (Fountain Hospital, London, Eng.)

Rubella as a cause of mental deficiency. Lancet. Nov. 26, 1955. 269: 6900:1113-1115.

Incidence, clinical symptoms and associated defects and prognosis in mental deficiency in a series of 8 cases are discussed. Although rubella is only one of many causes and accounts for a small proportion of all cases of mental deficiency, it has definitely been established that the disease in an expectant mother in the first four months of pregnancy can seriously damage the embryo.

## SCOLIOSIS

240. Shands, Alfred Rives, Jr. (Alfred I. duPont Institute, Wilmington, Dela.)

The incidence of scoliosis in the state of Delaware; a study of 50,000 minifilms of the chest made during a survey for tuberculosis, by A. R. Shands, Jr., and Harry B. Eisberg. J. Bone and Joint Surg. Dec., 1955. 37-A:6:1243-1249.

A review of English and American literature revealed very little information on scoliosis statistics of the type found in this study. Data are presented on incidence of scoliosis in persons over 14 years of age, race

### SCOLIOSIS (continued)

distribution, sex and age distribution, probable etiology, level of apex, and direction of curve. Although subject to error, the statistics present, in the authors' opinion, as accurate a picture as can be obtained of the incidence of scoliosis in any general population along the Eastern Seaboard in the United States.

### SEGREGATION AND NONSEGREGATION

See 167.

### SHELTERED WORKSHOPS--GREAT BRITAIN

241. Kennedy, T. F.

Remploy as a social service. Med. World. July, 1955. 83:1:52-56.  
Reprint.

Describes conditions of employment in Britain's 90 Remploy factories, formed in 1945 to provide employment for severely handicapped men and women, ex-service and civilian. Administrative details of the organization and social activities provided in most factories are discussed. The scheme also includes a homebound work program.

### SPECIAL EDUCATION

242. Bloustein, Murray (State Univ. of N. Y., Buffalo, N. Y.)

How special is special education? Exceptional Children. Dec., 1955. 22:3:98-100, 122.

An examination of the philosophy of special education, how it is meeting the needs of exceptional children, especially the physically handicapped, and the importance of sound vocational guidance for these children during their school years. Certain characteristic reactions of the handicapped, such as the setting of impossible goals, make vocational guidance imperative for their adjustment after leaving school.

243. S. Carolina Schools. Oct., 1955. 7:1.

Partial contents: The gifted child in the decade ahead, Paul Witty. - You and the speech or hearing defective child, Norman J. Lambries. - Educating the mentally handicapped child, John Zuidema.

In his article dealing with education of the exceptional child, Dr. Witty discusses identification of the gifted child, his needs and nature, the continued neglect of his needs, enrichment programs and methods used to administer them. Mr. Lambries offers teachers suggestions on meeting the needs of the child with defective speech and how the teacher can aid in overcoming his difficulties. Mr. Zuidema outlines an organizational plan for educating the mentally retarded and the comparative values of the special ungraded class and the homogenous special class.

See also 180.

### SPECIAL EDUCATION--EQUIPMENT

See 148.

### SPEECH CORRECTION

244. Froeschels, Emil (133 E. 58th St., New York 22, N. Y.)

A method of therapy for paralytic conditions of the mechanisms of phonation respiration and glutination, by Emil Froeschels, Shulamith Kastein, and Deso A. Weiss. J. Speech and Hear. Disorders. Dec., 1955. 20:4: 365-370.

"The use of the pushing exercise, a method of voice therapy first

SPEECH CORRECTION (continued)

introduced by Froeschels for patients with velar paralysis, is discussed. The pushing exercises were applied to patients with abductor and adductor paralysis of the vocal cords by Weiss. Kastein used them to meet the needs of patients with diseases of the central nervous system involving the functions of phonation, breathing, and swallowing...."--Summary. The exercises have become an indispensable method for treating patients with organic or functional paralysis of the soft palate and are highly useful in bulbar poliomyelitis, progressive bulbar paralysis, pseudo bulbar paralysis, Parkinson's disease, or muscular dystrophy.

245. Morrison, Sheila (668 Beechwold Blvd., Columbus, Ohio)

Measuring the severity of articulation defectiveness. J. Speech and Hear. Disorders. Dec., 1955. 20:4:347-351.

In same issue: Sherman, Dorothy and Morrison, Sheila. Reliability of individual ratings of severity of defective articulation, p. 352-358.

"...describes a method for obtaining precise measures of articulation defectiveness for short segments of continuous speech. Reliable scale values of severity were obtained for segments five seconds long and for segments 10 seconds long by use of the scaling method of equal-appearing intervals. A tape-recorded severity scale was constructed for each of the two segment lengths."--Summary. The usefulness of a precise scaling of severity of defectiveness is explained.

The purpose of the study reported in the second article was to determine whether reliable quantitative measures of the severity of defective articulation could be obtained from ratings of one-minute samples of speech by trained individual observers.

246. Sutton, Eddie Lee (Mrs. Sutton, 1813 Darrow Ave., Evanston, Ill.)

Integrating speech therapy with language arts. J. Speech and Hear. Disorders. Dec., 1955. 20:4:376-379.

Defines purposes of the rationale for integrating speech therapy with language arts in the elementary school. The integration plan is based on two parallel programs--a good language arts program in the classroom to provide adequate opportunity for the development of creative expression in the individual child and a good speech correction program to enable the child with speech problems to communicate as effectively as he can. Methods of administration and a graded list of objectives are suggested.

247. Van Hattum, Rolland J. (Speech and Hearing Services, Rochester Public Schools, Rochester, N. Y.)

Speech grows too. N. Y. State Educ. Dec., 1955. 43:3:184-185, 221.

Explains the growth and development of speech and language, the rate of development in speech consonant sounds, the developmental nature of fluency in speech, and the need to recognize these factors before labeling the child a speech defective. Teachers can make the daily classroom an ordeal for children with speech inaccuracies by failing to recognize all aspects of the problem.

#### STATE SERVICES--ILLINOIS

248. Kobes, Herbert R. (1105 S. 6th St., Springfield, Ill.)

Children with long term illness: 1. The medical aspects of the program care, by Herbert R. Kobes; 2. The nurse's role in these programs, by Mary Dalpa Ford. Nursing Outlook. Dec., 1955. 3:12:662-664.

Discusses briefly the special needs of children with long-term illness and the persons who help to meet those needs, as well as the places outside the home where help is offered. A case report on a child with rheumatic fever, whose illness was cared for through the Division of Services for Crippled Children of the University of Illinois, illustrates what can be accomplished through a state program of services in the case of long-term illness. The second part of the article, by Miss Ford, discusses the role of the public health nurse in long-term care of the child with chronic illness.

#### STATE SERVICES--OHIO

249. Eisenberg, Nathan P.

The changing crippled children's program in Ohio. Public Welfare in Ohio Today. Dec., 1955. 7:1:8-11.

A report on changes in the crippled children's program in Ohio, the variety of services it extends, the recent changes made in methods of accepting cases for care, and procedures for initiation of the case, agreement for care, reimbursements, date of acceptance, legal settlements, medical and financial re-evaluation, and suggestions for future changes.

#### TUBERCULOSIS

See 240.

#### TUBERCULOSIS -- MEDICAL TREATMENT

250. Association for Physical and Mental Rehabilitation

Symposium: New horizons in the development of a program for treatment of TB-NP patients (by) staff members, Veterans Administration Hospital, Brockton, Mass. J. Assn. Phys. and Mental Rehab. Nov.-Dec., 1955. 9:6:179-185.

Contents: Physical medicine in a neuropsychiatric tuberculosis program, Jacob L. Rudd. -Current trends in the medical treatment of tuberculosis, Emil Rothstein. -The psychiatric aspects of treatment of the TB-NP patient, Charles Taffel. -Development of a corrective therapy program for the TB-NP patient at Brockton, Kenneth Dening.

251. Smith, Alan DeForest (622 W. 168th St., New York 32, N. Y.)

The treatment of bone and joint tuberculosis. J. Bone and Joint Surg. Dec., 1955. 37-A:6:1214-1222.

A report of experiences in treating tuberculous bones and joints with streptomycin and the hydrazides of isonicotinic acid. It is believed these drugs have a beneficial effect, especially in some active severe cases with abscesses and sinuses. By themselves, however, they do not comprise adequate treatment but should be considered as an adjunct to surgery. Arthrodesis continues to be the safest and most effective method of treatment, the author believes. A few types of cases have been treated, apparently successfully, without surgery.

## TUBERCULOSIS--SOCIAL SERVICE

252. Watts, Mary E.

A study evaluating the effectiveness of medical social service in three chest clinics in Allegheny County, Pennsylvania, July 15, 1953 to June 15, 1954, by Mary E. Watts with the assistance of Marion S. Flury. Pittsburgh, The Author, 1955. 56 p. tabs. Mimeo.

A report of a study to evaluate the effectiveness of medical social service in the three diagnostic and treatment chest clinics in Allegheny County, Pennsylvania, which used medical social workers of the survey. Actual work performed by the medical social workers and its value to patients served, the amount of social service work time necessary for the provision of good service to these and similar clinics, and how such service increased the effectiveness of overall clinic performance in tuberculosis control were studied. Implications of the findings are discussed and case histories illustrate various problems in the care and treatment of tuberculosis patients which social work services can help to resolve.

Available from Natl. Tuberculosis Assn., 1790 Broadway, New York 19, N. Y.

## TUBERCULOSIS--SPECIAL EDUCATION

253. Bald, Jean

The use of study as occupational therapy for tuberculosis patients. Occupational Ther. Nov., 1955. 18:4:157-168.

The values of educational therapy for tuberculosis patients, types of patients for whom it is beneficial, study courses suitable for therapy, and the occupational therapist's role in providing materials for study are discussed.

## VITAL STATISTICS

254. Collins, Selwyn D.

Illness and mortality among infants during the first year of life, by Selwyn D. Collins, Katharine S. Trantham, and Josephine L. Lehmann. Washington, D. C., U. S. Public Health Service, 1955. 20 p. (Public Health monograph no. 31. Public Health Serv. publ. no. 449)

Data for the study are from six different illness studies conducted by periodic canvasses of families over considerable periods of time. Record of illness of infants as given here is carried only through the first year and data on illness are supplemented by other data on trends of total infant mortality in the birth-registration States for 1915-53, trends by sex, age, and geographic section for 1927-51, as well as mortality by sex, age, and cause in 1950. The text explains the numerous statistical tables.

Available from U. S. Superintendent of Documents, Washington 25, D. C., at 15¢ a copy.

## VOCATIONAL EDUCATION

See 236.

## VOCATIONAL GUIDANCE

255. Ayres, A. Jean (1321 E. 19th St., Santa Monica, Calif.)

A pilot study on the relationship between work habits and workshop production. Am. J. Occupational Ther. Nov.-Dec., 1955. 9:6:264-267, 297.

A report of a pilot study to determine the possible influence of work habits of trainees in a vocational training workshop on their production.

#### VOCATIONAL GUIDANCE (continued)

Subjects were cerebral palsied receiving training at the United Cerebral Palsy Center in Los Angeles. Of the 13 trainees 3 had good work habits which appeared to be a deciding factor in above average production. Three had low production scores attributed more to poor work habits than to poor dexterity. Procedures and results of the study are described.

#### VOCATIONAL REHABILITATION

##### 256. Warren, Sol L.

Vocational rehabilitation of the tuberculous. New York, Natl. Tuberculosis Assn., c1955. 193 p. tabs.

An abstract by Mary Dempsey.

An evaluation of a carefully controlled vocational rehabilitation program for the tuberculous, prepared by the author in partial fulfillment of requirements for the degree of Doctor of Philosophy, New York University. This abstract of Dr. Warren's original 600 page manuscript presents a picture of the decided contrast between the status of discharged patients who participated in a well-supervised vocational rehabilitation program and that of comparable patients who failed to participate. In addition, it analyzes the relapse rates for the two groups of patients during a 5 year period just prior to the introduction of drug therapy in the United States with data on costs of rehabilitation, public assistance, hospitalization, dependency status at time of diagnosis. Useful as a reference book demonstrating the economic value of rehabilitation, as well as its many other advantages. Dr. Warren's methods and findings constitute a pattern which may well be adapted to future studies of other handicapped groups or to the entire case load in selected areas.

Available from Natl. Tuberculosis Assn., 1790 Broadway, New York 19, N. Y.

#### VOLUNTEER WORKERS

##### 257. Burton, Robbie Hunt

Are volunteers needed in health and welfare services today? Junior League Mag. Nov.-Dec., 1955. 43:6:14-17.

A discussion of trends in volunteer services today and how they relate to the program of the Junior League. Some of the fields in health and welfare services in which the League has participated are mental health, rehabilitation, services for the blind, community planning; other areas which the author deems particularly appropriate to interests of the Junior League are public welfare services, work with the older citizen, integrating art and culture into therapy and welfare programs, and the interpretation of community agencies or organizations to the public. Miss Burton is consultant on welfare services for the Junior League.

#### New Books Briefly Noted

#### CHRONIC DISEASE--INSTITUTIONS

##### 258. Nicholson, Edna E.

Planning new institutional facilities for long-term care. New York, G. P. Putnam's Sons, 1956. 358 p. \$4.50.

This book, the result of ten years' exhaustive study of the problem of

#### CHRONIC DISEASE--INSTITUTIONS (continued)

the chronically ill and disabled and their care, analyzes ways of meeting the need, how to integrate such a program with hospital and health agencies' programs, and the many details of planning, administering, staffing, and financing more and better facilities for care of the chronically ill and disabled. Those concerned with the planning of facilities, their administrators, operators and proprietors of nursing homes, and management personnel of institutions caring for long-term and chronic patients will find here the answers to many of their questions. The study was conducted by the Institute of Medicine of Chicago.





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